

Upper Gastro Intestinal

Going home after your oesophageal surgery

You have now recovered enough from your operation to start thinking about going home. The aim of this information sheet is to help you to overcome any concerns you may have about going home.

Before you are discharged, there are a few things that the team caring for you will want to be sure of:

- That all of your wounds are healing properly
- That you are eating and drinking sufficiently
- That you are managing to look after yourself

If you have concerns about any issues about your recovery, including those above, please speak to a member of the team.

On the day of discharge you will be given a letter from the ward nurses. A copy of this letter will be sent to your GP. This letter has information about your tablets, your Outpatient appointments and includes a section about any referrals that may have been made for you, e.g. District Nurses.

Medication

If you require tablets, you will be given a seven-day supply before leaving hospital. The ward nurse will explain to you what they are and how you should take them.

Blood thinning injections

These will need to be continued for up to 28 days from the date of surgery. You or your carer will be taught how to give these before you are discharged or alternatively, a District Nurse will be arranged to give them.



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Wounds

If your stitches have not been removed before going home the ward nurses may ask you to go to your GP practice to have them removed or will arrange for a district nurse to visit.

If you still have a wound that needs a nurse to redress it, a district nurse will be organised or an appointment will be arranged to see a practice nurse at your GP practice.

If your wounds are healed, we would ask you to observe them regularly. Please look out for any of the following:

- Increased pain or tenderness
- Increased swelling or opening of the wound
- Redness or warmth around the wound
- If you have a temperature of above 38 degrees C

Any of these signs may indicate the possibility of a wound infection developing and you may need antibiotics so please contact your GP or let the Nurse Specialist know.

When bathing or showering **do not rub** the incision site just let the soapy water run over it. Try to avoid putting perfumed/scented soap or sprays near the wound site until it has fully healed, as this may cause irritation.

Feeding tube

If you have a feeding tube please note that the external stitch around the tube will need to be removed when you attend the appointment to see the nurse specialist three weeks after discharge.

Pain

It is normal to have some pain around the wound after your return home. The doctor will order some pain killers to take home with you. Take these as directed and at regular intervals, and if necessary obtain a repeat prescription from your GP

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Activities

Listen to your body and be aware of limitations. Take gentle exercise and build up gradually to resume your normal life style:

- Avoid heavy lifting for the first six weeks.
- Check with your doctor before you resume driving
- Rest if you feel tired
- Do not be feel ashamed if you need to rest or sleep during the day as this is quite normal
- Keep your anti-embolic stockings on for four weeks or until you are fully active
- Do not sit for long periods

Sleeping

Whilst initially you may be comfortable sleeping on your back supported by pillows following your discharge from hospital. In time as the pain settles you may wish to start sleeping on your side. If you do prefer to sleep on your side we would recommend that you sleep on the side of your surgery. This should help reduce the risk of acid reflux.

Nutritional support

You must remain on a soft, moist diet for the next 3 weeks after discharge. The Dietitian will visit you and provide detailed dietary information before you leave hospital. You will need to eat five to six times a day - small meals, snacks and nutritional supplements to help maintain your weight.

If your surgeon has placed a feeding jejunostomy tube, you will be fed through this whilst you are in hospital. Once you are allowed to eat a soft diet, you will be changed to an overnight jejunostomy feed to help meet your nutritional requirements. We would aim to send you home on this feed for at least the first three to four weeks to help support your nutrition whilst you are gradually building up your oral diet. During your hospital stay, a Nutrition Nurse will train you and if possible a family member on pump feeding and you will be able to practice setting up the feed before you leave hospital. You will be in regular contact with your Macmillan Dietitian and Nutrition Nurse, if necessary during this time and the Dietitian

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will also review you in Nurse-led clinic approximately three weeks after discharge.

Support once at home

When you leave hospital you may come across problems that you or your family need to talk to someone about. You may feel anxious and that you have been cut off from the hospital team. These feelings are normal and you can still access the hospital team by contacting:

Clinical Nurse Specialist: Tel. 024 7696 6475

Or

The ward from which you were discharged: Ward 11 Tel 024 7696 5800

Follow-up appointments

The Clinical Nurse Specialist will contact you within 4 days of your discharge

If you have any problems at any time, appointments are always available at the outpatient clinics or with your Clinical Nurse Specialist.

Arrangements will be made for you to be seen in clinic by the Clinical Nurse Specialist and Dietitian within three to four weeks of discharge. This will be held in clinic 6 which runs on a Monday afternoon.

Your Consultant will review you within six to eight weeks of your discharge.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact us on 024 7696 6475 and we will do our best to meet your needs.

The Trust operates a smoke free policy

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